

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID N .	DATE
P.E. DETERMINATION			
O.P.E. CLASSIFIER		12	2/2
FORMALITY REVIEW	BZ	559	03-28-71
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date	Claim	Date	Claim	Date
1	1/1	51		101	
2	1/2	52		102	
3	1/3	53		103	
4	1/4	54		104	
5	1/5	55		105	
6	1/6	56		106	
7	1/7	57		107	
8	1/8	58		108	
9	1/9	59		109	
10	1/10	60		110	
11	1/11	61		111	
12	1/12	62		112	
13	1/13	63		113	
14	1/14	64		114	
15	1/15	65		115	
16	1/16	66		116	
17	1/17	67		117	
18	1/18	68		118	
19	1/19	69		119	
20	1/20	70		120	
21	1/21	71		121	
22	1/22	72		122	
23	1/23	73		123	
24	1/24	74		124	
25	1/25	75		125	
26	1/26	76		126	
27	1/27	77		127	
28	1/28	78		128	
29	1/29	79		129	
30	1/30	80		130	
31	1/31	81		131	
32	1/32	82		132	
33	1/33	83		133	
34	1/34	84		134	
35	1/35	85		135	
36	1/36	86		136	
37	1/37	87		137	
38	1/38	88		138	
39	1/39	89		139	
40	1/40	90		140	
41	1/41	91		141	
42	1/42	92		142	
43	1/43	93		143	
44	1/44	94		144	
45	1/45	95		145	
46	1/46	96		146	
47	1/47	97		147	
48	1/48	98		148	
49	1/49	99		149	
50	1/50	100		150	

If more than 150 claims or 10 actions
 staple additional sheet here

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